CREDIT REPORT AUTHORIZATION

DISCLAIMER: This form is mandatory if you want a copy of your report. Please complete this form only if you would like the Capital Area Asset Building Corporation to obtain a copy of you credit report as part of your application. Social Security numbers are required in order to pull this report and the authorization form is filed in a locked cabinet at CAAB.

I hereby authorize the Capital Area Asset Building Corporation to retrieve my Credco credit report. I understand that this report is for the sole purpose of credit and financial education. Please show ID with submission of this form. I also understand that my information is confidential, for internal purposes only, and will not be sold or shared with any third parties including CAAB affiliates.

Full Name_____

Current Address_____

City_____ State_____ Zip Code_____

Length of Time at Current Address _____years _____months

Previous Address_____
(Complete if less than 2 years at current address)

City_____ State_____ Zip Code_____

Length of Time at Previous Address _____years _____months

Social Security Number_____

Date of Birth_____

Signature_____

Date_____

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